



PARENTAL CONSENT AND WAIVER FORM – ON SITE EXPERIENCE

In consideration of the student signing below (“Student”) being permitted to participate in the field trip and on-site experience to Carpenters Training Institute (“CTI”) the undersigned, the legal parent(s) or guardian(s) of the Student, hereby agree(s) to the following terms and conditions:

- 1. Participation:** Permission is granted for the Student to participate in the field trip to CTI’s location with the understanding that the Student is not required to attend this field trip. Participation is voluntary.
- 2. Information:** I/We understand and acknowledge that certain risks are inherent in this type of excursion and acknowledge that sufficient information has been provided by the Student’s school and CTI with respect to the planned activity, duration, location, method of transportation, participants and supervision. I/We acknowledge and certify that all required forms provided to us by the Student’s educational institution have been reviewed, accurately completed, and submitted to the Student’s educational institution.
- 3. Expectations:** I/We hereby acknowledge and understand that there are rules and regulations established for this field trip, and certain rules and regulations while on-site at CTI during the field trip. I/We acknowledge and agree that our Student is expected to abide by all CTI rules and regulations during the course of the activity and while on CTI’s premises. I/We agree to direct Student to cooperate with the directions and instructions communicated by CTI’s personnel while at CTI and all communications and directions communicated by the Student’s supervisory staff in charge of the field trip and tour.
- 4. Hold Harmless:** I/We acknowledge that, as a condition of the Student’s participation in this activity at CTI, I/we hold harmless and waive any and all claims against Carpenters Training Institute a/k/a Carpenters and Joiners Apprenticeship and Journeymen Training Trust Fund and its trustees, officers, employees, and agents including but not limited to claims arising out of any ordinary negligence of any CTI employee, agent, apprentice, student or volunteer while on CTI



premises, or any loss or damage to personal property occurring during or by reason of the Student participating in the field trip.

5. **Medical Care:** I/We consent to any of the staff, employees, agents and representatives of CTI administering or consenting to the administration of any such emergency medical care to the student as such person deems appropriate in the circumstances, and hereby authorize medical treatment in case of an emergency. I/we understand that CTI does not carry or maintain health, medical or disability insurance coverage for the Student and therefore agree to assume the responsibility for such insurance coverage on the Student. I/We also certify and acknowledge that if a Student has a medical condition CTI should be aware of, or if a Student requires any accommodation(s), I/We will notify CTI in writing at least seven (7) days prior to the field trip and have coordinated with the Student's educational institution to address those accommodation(s).

I/we hereby waive and release any claim against Carpenters Training Institute a/k/a Carpenters and Joiners Apprenticeship and Journeymen Training Trust Fund for any injuries suffered or sustained by Student during the field trip and on-site tour.

The Student and the parent(s) or guardian(s) acknowledge that they have read the "Parent Consent and Waiver Form" and are aware of the legal consequences of signing this binding document. My signature below indicates that I have read and freely signed this agreement. I further certify that I am legally competent to sign this agreement and have had time to provide this document to a legal representative of my choice for review.



CARPENTERS
TRAINING INSTITUTE

IMPORTANT- READ ENTIRE AGREEMENT/FORM BEFORE SIGNING

Name of Student: _____ / _____
(Print Name) (Date)

Student: _____ / _____
(Signature) (Date)

Student's Emergency Contact: _____
(Print Name)

Telephone Number: _____

Name of

Parent/Guardian: _____ / _____
(Print Name) (Date)

Name of

Parent/Guardian: _____ / _____
Signature (Date)

Name of

Parent/Guardian: _____ / _____
(Print Name) (Date)

Name of

Parent/Guardian: _____ / _____
Signature (Date)